-	
•	

	PATENT
Attorney Docket No.	

## COMBINED DECLARATION AND POWER OF ATTORNEY

This declaration is	is of the following type:	
origi	ginal design supplemental  ional stage of PCT  visional continuation continuation-in-part	
As a below named	ed inventor, I hereby declare that	
My residence, pos	ost office address, and citizenship are as stated below next to my name.	
I believe I am the inventor (if plural on the invention e	ne original, first, and sole inventor (if only one name is listed below) or an original, fir tal names are listed below) of the subject matter which is claimed and for which a pate tentitled:	st, and joint int is sought
	SCREW-TYPE INTRAOSSAL DENTAL IMPLANT	
the specification o	n of which:	•
(X)	is attached hereto.  was filed on as Serial No and won (if applicable).  was described and claimed in FCT International Application No. PCT/ CH99/Offiled on 22 September 1999 and as amended pursuant to PCT Ar (if any).	oas amended 0452 ticle 19 on
I state that I have as amended by ar	ve reviewed and understand the contents of the specification identified above, including any amendment referred to above.	the claim(s),
	the duty to disclose information that is material to the examination of the application and with 37 CFR §1.56.	on identified
certificate or of a States of Americ design registration country other tha	priority benefits pursuant to 35 USC §119(a) of any foreign application(s) for patent any PCT international patent application(s) designating at least one country other that ica listed below and have also identified below any foreign application(s) for patent, union, or inventor's certificate or any PCT international patent application(s) designating that the United States of America filed by me for the same invention and having a filing ication(s) from which the benefit of priority is claimed.	in the United utility model, g at least one

PRIOR FOREIGN PATENT, UTILITY MO	DEL, AND DESIGN REMED UNDER 35 USC §	GISTRATION 119(a)	THE SE
COUNTRY, STATE OF PRIOR FOREIGN APPLICATION	DATE OF FILING (day,month, year)	PRIORITY CI UNDER 35 US	AIMED C (119(a)
The state of the s	1.8.4	YES	NO
		YES	ŊŎ.
		XES	NO:



Von-BRAUNPATENT

+41512715268

I claim the benefit pursuant to 35 USC §119(e) of the following United States provisional patent application(s):

PRIOR U.S. PROVISIONAL BENEFIT CLAIMED I	L PATENT APPLICATIONS, UNDER 35 USC §119(e)
APPLICATION NO.	DATE OF FILING (day,month,year)

I claim the benefit pursuant to 35 USC §120 of any United States patent application(s) or PCT international patent application(s) designating the United States of America listed below and, insofar as the subject matter of each of the claims of this patent application is not disclosed in the prior patent application(s) in the manner provided by the first paragraph of 35 USC §112, I acknowledge the duty to disclose material information as defined in 37 CFR §1.56 effective between the filing date of the prior patent application(s) and the national or PCT international filing date of this patent application.

PRIOR U.S APPLICATIONS	PATENT APPLI DESIGNATING	CATIONS OR PCT I THE U.S., BENEFIT	NTERNATION CLAIMED UN	AL PATENT DER 35 USC	§120
	ENT APPLICATION			tatus (check or	
SERIAL NUMBER		U.S. FILING DATE		PATENTED PENDING ABANDO	
1.					
2.					
3.					
PCT APPLICATION	NS DESIGNATI	NG THE U.S.	. 5	itatus (check o	ne)
PCT APPLICATION NO. :	PCT FILING DATE	U.S. SERIAL NOS. ASSIGNED (if any)	PATENTED	PENDING	ABANDONED
4.					
5.					

As a named inventor, I appoint the following attorneys to prosecute this application and transact all business in the Patent and Trademark Office connected with this patent application.



John M. Belz, Reg. 30,359 Jeffrey A. Wyand, Reg. 29,458 Jeremy M. Jay, Reg. 33,587

Michael H. Tobias, Reg. 32,948 Gregory A. Hunt, Reg. 41,085

Patrick R. Jewik, Reg. 40.436 Joseph S. Ostroff, Reg. 39,321

I further direct that correspondence concerning this application be sent to:

LEYDIG, VOIT & MAYER, LTD. 700 Thirteenth Street, N.W., Suite 300 Washington, D.C. 20005 Telephone (202) 737-6770

PAT	ENT	,	
3		<b>\</b>	
:.		•	:;

			•	
I authorize my attorneys to accept and follow	v instructions from		regarding an	y
matter related to the preparation, examination, any continuation, continuation-in-part, or divided above, and any patent issuing from that pater writing.	grant, and maintenance sional patent application of application, until I of	my assigns with	draw this authorization i	in
I declare that all statements made herein of m and belief are believed to be true, that these stand the like so made are punishable by fine or States Code, and that such willful false state issued thereon.	itements were made with	under Section 100	of Title 18 of the Unite	ed
Full name of sole or first inventor: Ulric	h J095		-	
Inventor's signature	100		Country of Citizenshi	p: GER
Residence: Gartenetrasse 21, DE-4	8147 Münster (G	rmany)		
Post Office Address: same as above				
Full name of second joint inventor, if any:				-
Inventor's signature				
Date			Country of Citizensh	ip:
Residence:	•			
Post Office Address:	•			

Full name of third joint inventor, if any:

Inventor's signature

Date \_\_\_\_\_

Country of Citizenship:

Residence:

Post Office Address: